### SECRET (When filled in)

Youcher No. 5042 24 June 1960

MEMORANDEN FOR: Chief, Finance Division

ATTENTION

: Monetary Branch

SUBJECT

: Disbursement of Treasury Check

1. It is kindly requested that a U. S. Treasury Check be drawn in favor of the company listed hereunder in the amount stated, which will be applicable to the contract or agreement shown. The contract number and invoice identification must appear on the check.

a. Check drawn in favor of:

Edgerton, Germeshausen and Grier, Inc.

b. Amount:

\$29,852.30 ---

c. Contract Mumber:

TB 2191

d. Invoice Number:

78 and 79

e. Check to be dated:

26 June 1960

- 2. Pertinent documentation in connection with the classified transaction which has not been included in accordance with Comptrollers Instruction No. 32 the Office of the Comptroller, DPD-DD/P.
- 3. The payment requested is based on progress made by the Contractor to date and should be processed against General Ledger Account No. 138 titled "Disbursement of Appropriated Funds Chargeable to Confidential Funds Allotments Avaiting DCI Certification." The allotment Symbol Applicable to this request is 0568-096045300 (0749) and the amount is chargeable to General Ledger Account No. 601.0.
- 4. The check should be dated as stated in Paragraph 1 and mailed in the attached self-addressed envelope. If no envelope is attached the undersigned should be contacted on extension when payment is ready for disposition.

25X1

SIGNED

25X1

AUMORIZED CERTIFIES OFFICER 24 June 1960

Dist:

2 - Ada

Contract TE-2191 (Posting)

l - Voucher

EL:jt/DPD-Fin/24 June 1960

SECRET (When filled in) Approved For Release 2008/12/11 : CIA-RDP65-00523R000100160022-1

Standard Form No. 1034 7 GAO 5030 1034-106

## PUB VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

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	D. O. VOU. NO.	

				Use continuation sheet	(s) if necessary		₿U. V	OU. NO <b>F</b>	age 1 of 1
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				it, bureau, or establishment)					
Voucher pre	pared	d at		(Give place and da	te)			-	
				Discount Term					
rayee s Acc	ount	NO		Discount Term	<b></b>			- [	
TO		Edgerto	n, Germeshaus	en and Grier,	Inc.			_	
	(Pay	ee)							
	(Addre	ss)						. L	
Contract No. Shipped from	TE	2191	Date to	Req. No. Weight		Date	Govt. B/l		e Rec'd.
No. and Date of	f Date	of Delivery	(Enter description ite	RTICLES OR SERVICES m number of contract (	or Federal suppl	Quantity	UNIT	PRICE	AMOUNT
Order	01	r Service	schedule, and ot	her information deeme	d necessary)	Godininy	Cost	Per	*
				Inv. No	<b>5.</b>				\$27,138.45
				79					2,713.85
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Exchange rate			=\$1.00						tracting
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		ACCOUNT	ING CLASSIFICATION	(Appropriation Sym	ł	,		···· • • · · · ·	,
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	Cash,	\$		, on	. 19 Po	ıvee			
* When used in			rt name of currency of coun	<del></del>					
	-		•	iry in which used. in one person, one signature	only is nec-	r			
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Approved For Release 2008/12/11 : CIA-RDP65-00523R000100160022-1

Standard Form No. 1034 Approved For Release 2008/12/11 : CIA-RDP65-00523R000100160022-1 PUBLE VOUCHER FOR PURCHASES AND 1034-107 SERVICES OTHER THAN PERSONAL 78 BU. VOU. NO.\_\_\_ Use continuation sheet(s) if necessary PAID BY Contracting Officer
(Department, bureau, or establishment) Voucher prepared at \_\_\_ (Give place and date) Payee's Account No. \_\_\_\_\_ Discount Terms \_\_ Edgerton, Germeshausen & Grier, Inc. (Address) Date 4/26/57 Contract No. TE 2191 Req. No. Date Invoice Rec'd. Shipped from Weight Govt. B/L No. ARTICLES OR SERVICES UNIT PRICE AMOUNT No. and Date of Date of Delivery (Enter description, item number of contract or Federal supply Order or Service schedule, and other information deemed necessary) Cost Month ending 30 April 1960 \$8,462.43 Direct Labor 3,598.41 6,543.44 Materials & Services Travel Expense Freight & Express Other Direct Charges 102.41 6,185.40 Burden G & A 2,240.79 TOTAL (PAYEE MUST NOT USE THIS SPACE) PAYMENT: DIFFERENCES \_ COMPLETE PARTIAL FINAL PROGRESS Amount verified; correct for ADVANCE (Signature or initials) Pursuant to authority vested in me, I certify that † Approved for \_ this voucher is correct and proper for payment. By\_ Title \_ (Authorized Certifying Officer) =\$1.00Exchange rate THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Check No. -\_\_\_\_\_ on Treasurer of the United States Check No. Paid by (Name of Bank) When used in foreign countries, insert name of currency of country in which used. † If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$\_\_\_\_\_\_", and

over his official title.

Title\_

## Approved For Release 2008/12/11 : CIA-RDP65-00523R000100160022-1 Standard Form No. 1035 7 3AO 5030 1035-104 Pub Voucher for D Services Other Than Personal

### CONTINUATION SHEET

	Date of ARTICLES OR SERVICES		OUAN	UNIT PRICE		AMOUNT	
o. and Date of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per		
		Direct Labor 8,462.43					
		Material & Services 3,598.41					
		Material & Services 3,598.41 Travel Exprnse 6,543.44					
		Freight & Express 5.57					
		Other Direct Charges 102.41	_				
		*Burden 6,185.40				1	
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		G & A:				0.010	
		Total Direct Costs @ 9%				24,897.6 2,240.7 \$27,138.4	
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	CONTROL SACOLA COLLAND	
Standard Form No. 1034	Approved For Release 2008/12/11 : CIA-RDP65-00523R000100160022-1	
7 GAO 5030	PUBLE VOUCHER FOR PURCHASES AND ON YOU NO.	
T034-107	SERVICES OTHER THAN PERSONAL	
	Use continuation sheets) if necessary BU, YOU, NO. 79	

Copy	S	Contra	acting Officer (Department, bureau,	or establishment)				PAID BY
Discount Terms   Discou	oucher pre	pared at						,
Intert No. TE 2191   Date 4/26/57   Req. No.   Date   Invoice Rec'd.							5.	A TO A O
Intert No. TE 2191   Date 4/26/57   Req. No.   Date   Invoice Rec'd.	yee's Acc	ount No	DISC	count terms				DP3- 9784-60
TOTAL    Pare	·	Edgerton, (	Germeshausen & Grie	er, Inc.			# P.7%	COPY / OF2
ARTICLES OR SERVICES  Cost Per   Cost Per   Month ending 30 April 1960  Fixed Fee \$2,713.85   MENT:  OMPLETE   DIFFERENCES   DIFFERENCES   DIFFERENCES    Amount verified; correct for    SOURCE   DIFFERENCES   DIFFERENCES    Amount verified; correct for    SOURCE   DIFFERENCES   DIFFERENCES    DIFFERENCES   DIFFERENCES    Amount verified; correct for    SOURCE   SUBJECT   SUBJECT    Amount verified; correct and proper for payment.  This voucher is correct and proper for payment.  The REVERSE OF THIS FORM MUST RE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM		(Address)					<u> </u>	
Month ending 30 April 1960  Fixed Fee  Month:  (PAYEE MUST NOT USE THIS SPACE)  ORRESS   DANACE   DIFFERENCES   DI	ntract No. pped from	TE 2191	-			Govt. B/L		ce Rec'd.
Month ending 30 April 1960  Fixed Fee  Month ending 30 April 1960  Fixed Fee  TOTAL  (PAYEE MUST NOT USE THIS SPACE)  DIFFERENCES  DIFFERENCES  Amount verified; correct for  (Signature or initials)  DIVANCE  Per  (Signature or initials)  Amount verified; correct for  (Signature or initials)  April 1960  Per  (Authorized Certifying Officer)  (Dote)  TOTAL  Amount verified; correct for  (Signature or initials)  (Authorized Certifying Officer)  (Dote)	. and Date o	f Date of Delivery	ARTICLES C	OR SERVICES or of contract or Federal supp	ly Quantity			AMOUNT
## Fixed Fee \$2,713.85    MENT:	Order	or Service			_	Cost	Per	•
MENT:  (PAYEE MUST NOT USE THIS SPACE)  DIFFERENCES  DIFFERENCES  Amount verified; correct for (Signature or initials)  Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.  Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.  Authorized Certifying Officer)  THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM			Month ending 30	April 1960				
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Amount verified; correct for (Signature or initials)  Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.    Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.    Authorized Certifying Officer (Dote)	MENT:		(PAYEE	MUST NOT USE THIS SPA	(CE)			
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Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.    Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.    Authorized Certifying Officer   (Date)	NAL [	<u> </u>						
this voucher is correct and proper for payment.     Code   Code	OGRESS	]   ]						
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THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM	e			†(Author	rized Certifying C	Officer)		(Date)
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Approved For Release 2008/12/11: CIA-RDP65-00523R000100160022-1

Standard Form No. 1035 \*\*GAO 5030 1035-104

# Pub Voucher for Purchases and Services Other Than Personal

## CONTINUATION SHEET

No. and Date of Order	Date of	ARTICLES OR SERVICES	OUAN-	UNIT	PRICE	AMOUNT
of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	
		Costs thru April 1960 Fixed Fee Earned (10% of above) Fixed Fee Previously Billed Amount of this Voucher				356,203.9 35,620.1 32,906.5 \$ 2,713.8
	and	rtify that the Fixed Fee claimed is correct that it is proportionate to the progress maract."			•	
		TOOLS OF HEALT				STAT